



Wajibika Annual Performance Monitoring Report 2010

Introduction

Tanzania has a long history of decentralization stretching from the 70s when there was a move to take administrative power to the regions. This was the so called “Madaraka Mikoani (Power to the regions). This was followed by the initiative to decentralize further down to the councils. The 1998 Policy Paper on Local Government Reform, paved the way for concrete efforts to implement decentralization including the recent reforms in local governance, notably the launch of the Local Government reform Programme II: Decentralization by Devolution (D by D), July 2008–June 2013. D by D provides opportunity to support and strengthen the capacity of local government authorities (LGAs) to operate independently of central and regional authorities in managing council development programs.

At the end of 2009, USAID awarded Abt Associates Inc, under the AIDSTAR II mechanism, a project called “Wajibika,” (Kiswahili word for “be accountable”). Wajibika supports the Government of Tanzania’s initiatives to strengthen LGA capacity for financial and programmatic accountability under the D by D program.

Abt Associates works on the Wajibika Project with its partners, the Prime Minister’s Office Regional Administration and Local Government, the Ministry of Health and Social Welfare and two other partners, Family Health International and TechnoBrain Tanzania Ltd.

The project employs a variety of interventions that increase accountability through better resource coordination, integrated program planning, budgeting, reporting and use of data, as well as, establishing feedback mechanisms, identifying incentives for improved work performance, and providing coaching and on-the-job training through mentorship. This comprehensive approach continues to assist the Government of Tanzania (GOT) in fostering greater country ownership, improved governance, and increased potential for sustainable and high quality models of service delivery. Wajibika promotes strategic advocacy with stakeholders at all levels of government, spurring competition among LGAs to encourage better implementation of councils programs.

This report highlights achievements, constraints and solutions from the activities implemented within the first year of the project. The project started in February 2010. During the inception, the project calendar was intended to be aligned with the USAID fiscal year which is October – September. Therefore the first year of the project only covered the period February – September 2010.

Activities Completed by quarter

1. First quarter Project Implementation (Jan – March 2010)

During the first quarter of the project most of the activities were related to start-up. Wajibika conducted several meetings with key Government of Tanzania (GOT) stakeholders at national, regional and council levels to obtain strategic advice and essential buy-in. In addition to government stakeholders, the Wajibika team conducted introductory meetings with development partners in Tanzania.

Based on the advice gained from the above mentioned stakeholder meetings, and in particular PMORALG and MOHSW's focus on using a regional approach to implementing development related interventions, Iringa Region was selected to be a start up region covering eight councils.

Wajibika also successfully conducted a rapid assessment in all start-up councils in February-March 2010, analyzed the data and prepared a report which formed the basis for the identification and selection of possible interventions.

2. Second Quarter of project implementation (April - June)

During this quarter, Wajibika continued to implement activities according to the first year implementation plan. Wajibika also continued advocacy work through meetings with the different authorities in the country including PMORALG, Development Partner Groups, Regional Secretariat and Local Council Authorities.

Wajibika also advertized positions for mentors who would work within the eight councils in Iringa. The advertisements drew some interesting applicants. The use of mentors as a means of providing support to the districts was enthusiastically received by the council authorities. It was really encouraging to see their enthusiasm in the process of identifying mentors and in particular during the interview process where three council representatives actively participated as core members of the Wajibika interviewing panel. Their participation enhanced the recognition of mentors in the councils making their work easier and more effective and sustainable.

Third Quarter of project implementation (July-September 2010)

During the third quarter, Wajibika registered the following achievements:

The MOHSW and PMO-RALG identified senior level staff to be champions for Wajibika interventions: The Ministry of Health through the Chief Medical Officer identified Dr. Anna Nswila to be the focal person for Wajibika. Anna works with the Ministry of Health as District Health Services coordinator. This is an appropriate choice for Wajibika because Anna is responsible for all Council/District activities and directly responsible for the development and supervision of the Comprehensive Council Health Plans. From the PMORALG, Mr. Antony S. Gikaro who is an accountant has been appointed to be the focal person for Wajibika.

Hiring, training and deployment of Mentors to Councils: Advertisement and selection for mentors was done towards the end of the previous quarter. The mentors were oriented, trained and deployed in their respective councils.

Selected roll-out Councils: The selection of roll out councils has been agreed upon based on the same "whole region" approach. Three roll out regions have been selected. The new regions

include Dodoma (seven councils), Morogoro (six councils) and Pwani (eight councils) – making a total of 21 new councils.

MOUs signed in eight start up Councils: The MoUs between Wajibika and councils have been signed in all eight start- up councils.

MoUs with PMORALG, MoHSW and MoFEA signed: The MoU has been signed by the Ministry of Health and Social Welfare and has been forwarded for the other signatures by the PMORALG and later on by the MOFEA.

Wajibika successfully negotiated a scope of work and budget to develop a subcontract with PMO-RALG, which has been submitted to USAID for approval.

Dissemination of Rapid Assessment findings: Wajibika conducted a one day meeting with Iringa Region officials and Council Directors to disseminate the results of the Rapid assessment conducted in February 2010. Participants were impressed by the findings and the suggested interventions. Also the findings were discussed with the Chief Medical Officer MOHSW and Deputy Permanent Secretary PMORALG. Other groups include the ECHO and Public Finance Management (PFM) Groups of Development Partners

Training of council Internal Auditors: Twenty-one Internal Auditors from eight councils and the Regional Secretariat were trained by Wajibika through the Institute of Internal Auditors (IIA) on the development of risk based annual audit plan and report writing. The purpose of the training aimed at bridging the gap identified during the rapid assessment and equipping them with contemporary professional standards.

Supervision of Wajibika council mentors: The Wajibika team conducted supportive supervision to all council mentors with the aim of assessing mentors' performance and interpersonal relations as they worked with council staff. The key findings from these supervision visits were: All seven mentors were present in the visited councils, they all have good relationship with council staff, there are positive changes observed in the councils as a result of mentor' interventions e.g. enhanced punctuality and signing of attendance registers, preparation and use of work plans and preparation and submission of council monthly quarterly and annual financial reports in a timely manner and according to agreed format and guidelines. In addition, there are updated OVC registers and list of partners.

The table below shows some of the benchmarks for the first year of the project:

Benchmark	Status
Security in place for Dar Office	In progress
M&E plan to Dec 31 2011 finalized and submitted to USAID	Completed
Routine project reporting systems set-up	On going
Report on rapid assessment	Completed
Right Rapid assessment report	Completed
Disseminate rapid assessment results study findings	In progress
Identify senior level MOHSW and PMO-RALG staff to be champions for interventions	In progress

Hire mentors for startup councils	Completed
Train/orient mentors in eight start-up Councils	Orientation done at Hq level , training scheduled for second week of July 2010
Identify relevant written resources and disseminate to eight start-up Councils	Done (Documents include, Health Sector Policy, HSSP III, CCHP guideline, Health Centre and Dispensary Planning template, Code of Conduct for the Public servant, LGRP II, PPA, 2004, Procurement Regulations for works, goods and non consultant 2005, Procurement regulations for Consultancy services 2005, Local Government Financial Memorandum, Guideline for the preparation MTF and presentation handouts.
Identify senior level MOHSW and PMO-RALG staff to be champions for interventions	Completed
Develop web based tool for Councils, mentors and supervisors (at council, regional and central levels)	In progress
Select roll-out Councils	Completed
MOUS signed in eight start up Councils	Completed
MoUs with PMORALG, MHSW and MOEA signed by Ministry of Health	In progress
Disseminate rapid assessment results study findings	Completed
Hire mentors for startup councils	Completed
Train mentors in eight start-up Councils	Completed
Conduct quarterly supportive supervision to mentors	Completed
Training of council Internal Auditors for startup councils	Completed
Second year draft workplan	Completed, pending USAID approval

3. Problems Encountered (and whether resolved or outstanding)

During the year a few challenges have been identified. These include:

- Start-up councils: Initially, the Wajibika team proposed to conduct the pilot phase within a limited number of selected councils within Dodoma and Iringa. After consultations with several stakeholders, however, the Wajibika team decided to adopt a preferred total regional approach, and start in Iringa Region (with all eight councils). The GOT stakeholders were highly in favor of this change, due to Iringa's high HIV prevalence and the mix of types of councils (which is strategic for a pilot). Thus, the challenge in identifying appropriate start-up councils was **resolved**.
- Establishing MoUs with the PMO-RALG, Ministry of Finance and Economic Affairs and Ministry of Health and Social Welfare. Signing of MoUs with multiple ministries normally takes a long time; however, we have been trying to push so that we can keep delays to tolerable levels. The MoUs have being submitted to

the relevant Ministries as of Mid June 2010. In August the MoU has been signed by the Ministry of Health and Social Welfare. We are still following up with the other ministries - ongoing

- Changes in number of councils: There have been changes in the number of councils in the target regions. One additional council of Wanging'ombe has been formed in Iringa and the Region has been divided into two – Iringa and Njombe Regions. In Dodoma – one of the scales up regions there is new district of Chemba being formed. We have to adjust our plans and budget according to these changes – ***such problems are dealt with as they occur.***
- Identification of performance related incentives: There has been differing opinions on this topic. Whereas the GOT through the Ministry of Health and Social Welfare would like some form of Pay for Performance (P4P), some of the Health Development Partners seem to be unsure as to whether there has been enough preparation to implement this approach. This has led to the delay in GOT implementation of P4P. In Wajibika's baseline assessment we found that councils are currently already implementing certain types of incentives. For instance, some workers were being awarded a best worker incentive on Labor Day (1st of May of every year).

Proposed Solutions to New or Ongoing Problems

As can be seen from the above section, there are few challenges which Wajibika is carrying over into the new year (second year of the project). Such challenges are indicated below.

- MoUs with the PMO-RALG, Ministry of Finance and Economic Affairs and Ministry of Health and Social Welfare: The Wajibika team will closely follow up with the remaining ministries as necessary so that the MoUs can be signed as soon as possible.
- Identification of performance related incentives: Wajibika is not thinking of putting up new mechanisms but rather identify the ones in place and those found effective might be shared with other councils.

Success Stories

In this report we have included two success stories as shown in Annex 1: Internal Audit Training for Strengthening Accountability with Local Government Authorities (LGAs) In Tanzania and Annex 2: Deployment of Mentors at Council Level Makes a Difference in Tanzania.

SPAR Indicators

Due to the fact that Wajibika is not a service delivery project, none of the SPAR indicators are applicable. Therefore, the Wajibika team has selected outcome and process indicators that will be tracked on a semi-annual and annual basis. In the last Wajibika semi-annual report that Abt submitted, the following indicators were mentioned:

1. % of targeted councils that adopt and implement at least one council strengthening intervention

100% (Thus far, 8 pilot councils in Iringa have been targeted and all have adopted council strengthening interventions).

2. % of targeted councils that receive a clean Health Basket Fund audit report.

Not yet applicable

3. % increase in the number of identified external sources of resources that provide support for implementation of the CCHP.

Not yet applicable

4. % Councils with MOUs with Wajibika that implement the terms of the MOUs
100% (Thus far, 8 pilot councils in Iringa have been targeted and all have signed MOUs).

Since the project has not been in operation for a full year (started January 2010), and there was an initial start up period, the project has only been able to collect data for indicator 1 and 4. It will take more time to report on indicators 2 and 3 in a comprehensive way. In future annual and semi-annual reports, the project will also report on the following two process indicators.

5. Number of CHMT members trained

6. Number of facility staff trained

Annex 1: INTERNAL AUDIT TRAINING FOR STRENGTHENING ACCOUNTABILITY WITH LOCAL GOVERNMENT AUTHORITIES (LGAs)- IN TANZANIA

Under the contemporary audit approach, it is crucial to develop risk based annual audit plans by identifying high risk departments and processes on which internal auditors should focus their audit efforts during the year. This will allow auditors to write more comprehensive, high impact internal audit reports, which will appropriately drive management actions.

Within the current system, most LGA internal auditors typically take a more traditional approach, whereby they pay more attention to verifying financial transactions to make sure that they are approved, and signatures are there. However, these auditors ignore larger and more complex issues within the underlying council financial system. For example, most internal auditors do not attend to important systemic issues, such as those related to corporate governance, human

resources and operations. Wajibika, a USAID funded project, led by Abt Associates Inc. with its partners, Family Health International and Technobrain supports the Government of Tanzania's initiatives to strengthen Local Government Authorities' capacity for financial and programmatic accountability.



Wajibika, in collaboration with the Institute of Internal Auditors (IIA-an international professional association), trained 21 LGA and Regional Secretariat internal auditors within Iringa region on preparation of risk based annual audit plan and writing high impact internal audit reports that address both financial and system wide issues.

A training workshop participant named Hassan Matumla from Kilolo stated "... the training was very useful to me. Before the training I was not aware of the international standards, and risk planning. Now I am aware of this and I have used the risk assessment approach to prepare the July-September audit report ..." Hassan also admitted that after the training, he prepared the quarterly audit report basing on the instructors' directives. Another participant Mr. Gillian B. Bukori, the Regional Secretariat's Chief Internal Auditor said, "the training was an eye opener and highly appreciated by all especially the topic related to risk assessment and their control. I feel that the internal auditors from councils benefited the most from this new knowledge."

Overall, the training was considered successful. Auditors were also exposed to the International Professional Practices Frameworks (IPPF); a body of knowledge issued by the IIA which internal auditors across the globe use as a guide in performing audits that add value to their organizations. Upon post training evaluation, 82% strongly agreed that the knowledge and skills



One of the participants of the workshop receiving the Certificate of Attendance from the Guest of Honor

gained will improve individual performance on the job. Participants requested Wajibika Project to support them to be registered members of IIA through which they can access contemporary issues in the auditing profession and undertake professional examinations resulting to the award of global “ Certified Internal Auditor”(CIA).

Annex 2: Deployment of Mentors at Council Level Makes a Difference in Tanzania



Mentors and trainers in group photo at Iringa Primary Health Institute

The traditional approach to strengthening capacity at different levels of the council workforce has been to conduct a number of external seminars with Local Government Authority (LGA) staff, especially those within the Tanzanian health sector. At the same time the councils have a serious shortage of qualified human resources. This traditional approach **removes workers from their place of work** for a long time, which further aggravates the existing human resource shortage.

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This innovative approach entails the use of mentors to provide on-the-job training, guidance and coaching for council staff. Wajibika recruited, oriented and deployed mentors to seven councils (out of eight) within Iringa region. Mentors started working with LGA staff on July 1st 2010. Two weeks later, Wajibika conducted a workshop to train the mentors which was facilitated by various presenters from USAID-TZ, Ministry of Health and Social Welfare (MOHSW), Prime Minister's Office Regional Administration and Local Government (PMORALG), Iringa Regional Secretariat, and the Wajibika Team shared with the mentors various experiences, knowledge and skills in the area of mentoring and coaching. During the subsequent three months, the Wajibika headquarters technical team conducted supportive supervision to the mentors. In order to better inform the mentors, and identify strategic interventions, prior to deploying the mentors, the project conducted a rapid assessment in Iringa, and identified several challenges at LGA level.

LGA staff seem to appreciate the Wajibika approach to building capacity. For example, the Council Director for Njombe Town Council, Mr. George Mkindo, remarked: "Wajibika mentors are useful to the council and they have already registered positive changes such as the development and use of personal workplans where previously they did not exist. Staff were operating unsystematically and thus achievements were difficult to substantiate". The Wajibika team further observed that as a result of mentor interventions, in Njombe District Council, all council staff now sign in the council attendance registers daily as required and in time, prepare and submit council monthly quarterly and annual financial reports timely and according to agreed format and guidelines. Additionally, there are now updated OVC registers and list of partners.

It is evident that the Wajibika mentoring approach has and will continue to make the desired difference.